

In the Matter of

DECISION

HMO/172491

# PRELIMINARY RECITALS

Pursuant to a petition filed March 05, 2016, under Wis. Stat. § 49.45(5)(a), and Wis. Admin. Code § HA 3.03, to review a decision by the Division of Health Care Access and Accountability in regard to Medical Assistance, a hearing was held on April 07, 2016, at Milwaukee, Wisconsin.

There is no longer any issue for determination by the Division of Hearings and Appeals.

There appeared at that time and place the following persons:

# PARTIES IN INTEREST: Petitioner: Respondent: Department of Health Services 1 West Wilson Street, Room 651 Madison, Wisconsin 53703 By: RN consultant

ADMINISTRATIVE LAW JUDGE: Mayumi M. Ishii Division of Hearings and Appeals

### **DISCUSSION**

Petitioner's father submitted a request for hearing, because the Department of Health Services (DHS) denied coverage of orthodontics for his daughter. On March 17, 2016, DHS issued a letter, indicating that it was now approving the orthodontic work. On April 7, 2016, the Petitioner's father submitted an e-mail, indicating that DHS's letter, "meets the qualifications I was requesting."

Because there is no longer any issue that needs to be resolved by the Division of Hearings and Appeals, this appeal will be dismissed. If I have misunderstood the situation, the Petitioner's father is directed to the rehearing instructions below.

# **CONCLUSIONS OF LAW**

There is no longer any issue for determination by the Division of Hearings and Appeals.

### THEREFORE, it is

### **ORDERED**

That the petition is dismissed.

### REQUEST FOR A REHEARING

You may request a rehearing if you think this decision is based on a serious mistake in the facts or the law or if you have found new evidence that would change the decision. Your request must be **received** within 20 days after the date of this decision. Late requests cannot be granted.

Send your request for rehearing in writing to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400 **and** to those identified in this decision as "PARTIES IN INTEREST." Your rehearing request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and explain why you did not have it at your first hearing. If your request does not explain these things, it will be denied.

The process for requesting a rehearing may be found at Wis. Stat. § 227.49. A copy of the statutes may be found online or at your local library or courthouse.

### APPEAL TO COURT

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be filed with the Court **and** served either personally or by certified mail on the Secretary of the Department of Health Services, 1 West Wilson Street, Room 651, Madison, Wisconsin 53703, **and** on those identified in this decision as "PARTIES IN INTEREST" **no more than 30 days after the date of this decision** or 30 days after a denial of a timely rehearing (if you request one).

The process for Circuit Court Appeals may be found at Wis. Stat. §§ 227.52 and 227.53. A copy of the statutes may be found online or at your local library or courthouse.

Given under my hand at the City of Milwaukee, Wisconsin, this 11th day of April, 2016

\sMayumi M. Ishii Administrative Law Judge Division of Hearings and Appeals

2



# State of Wisconsin\DIVISION OF HEARINGS AND APPEALS

Brian Hayes, Administrator Suite 201 5005 University Avenue Madison, WI 53705-5400 Telephone: (608) 266-3096 FAX: (608) 264-9885 email: DHAmail@wisconsin.gov Internet: http://dha.state.wi.us

The preceding decision was sent to the following parties on April 11, 2016.

Division of Health Care Access and Accountability